

Amendments to the Claims:

This listing of claims replaces all prior versions and listings of claims in the application:

Listing of Claims:

1. (Currently Amended) A method of determining if a subject is at risk for prostate cancer recurrence, the method comprising:

providing a sample from a primary tumor of a subject diagnosed with prostate cancer; and

determining human prostate specific membrane antigen (PSMA) expression levels in the sample,

wherein the human PSMA comprises the amino acid sequence of SEQ ID NO:1 or SEQ ID NO:2 and wherein increased PSMA expression levels relative to a reference standard that is statistically significant between subjects diagnosed with prostate cancer and having recurrence and subjects diagnosed with prostate cancer that do not have recurrence indicate a risk of prostate cancer recurrence, thereby determining if the subject is at risk of prostate cancer recurrence.

2. (Canceled)

3. (Cancel)

4. (Cancel)

5. -7. (Cancel)

8. (Currently amended) The method of claim [[7]]1, wherein the ~~tissue~~ sample is a biopsy sample.

9. (Cancel)

10. (Currently amended) The method of claim [[7]] 1, wherein the ~~tissue sample~~ is obtained from a partial or radical prostatectomy of the subject.

11. (Original) The method of claim 1, wherein the risk of recurrence is determined upon diagnosis of prostate cancer.

12. (Original) The method of claim 1, wherein the risk of recurrence is determined after the subject is diagnosed with prostate cancer.

13. (Original) The method of claim 1, wherein the risk of recurrence is determined after the subject has been treated with an anti-cancer treatment.

14. (Original) The method of claim 13, wherein the anti-cancer treatment is a radical or partial prostatectomy.

15. (Original) The method of claim 1, wherein PSMA expression levels are determined by determining the PSMA protein levels in a sample.

16. (Original) The method of claim 15, wherein PSMA protein levels are determined by a method selected from the group consisting of an enzyme-linked immunosorbent assay (ELISA), a radioimmunoassay (RIA), a Western blot, or an immunohistochemical assay (IHC).

17. -32. (Cancel)

33. (Previously presented) The method of claim 1, wherein a subject that does not have a statistically significant increase of PSMA expression as compared to the reference standard is assigned a value of 40% or less risk of recurrence.

34. (Previously presented) The method of claim 1, wherein a subject that does not have a statistically significant increase of PSMA expression as compared to the reference standard is assigned a value of 30% or less risk of recurrence.

35. -40. (Cancel)